



# PROXY STATEMENT FORM

Appointment Date/Time: \_\_\_\_\_

I, or an authorized representative from my company, will not be able to participate in the Priority Placement Booth Selection for SupplySide West 2025 during my company's scheduled selection time. Therefore, I wish to authorize a SupplySide West show management member to select my company's exhibit space on my behalf.

## Proxy Form Instructions:

1. Complete all fields of the Booth Contract on page two of this document.
  - a. The amount and type of booth space you select on the application will be used to select your booth for 2025.
  - b. List 5 or more booth options (in order of preference) on the application.
2. Return the fully-completed form (all pages) to [Aliece.Stewart@informa.com](mailto:Aliece.Stewart@informa.com) to complete the Proxy form.
3. During your appointed time, a booth will be selected on your behalf by SupplySide West show management (Informa Exhibitions) based on your listed booth size, type, and preferences, as well as booth availability at the time.
  - a. Any preferences listed are not guaranteed to be assigned.
4. After placement, a confirmation email will be sent to the Primary Contact listed in the contract which will include your assigned booth space.

My company understands that the Proxy Statement Form is NOT a space reservation form but is a legal and binding agreement. My company agrees to accept the booth number(s) and location selected on our behalf by SupplySide West show management staff and understands that we are liable for the exhibit space(s) selected. My company hereby releases Informa Exhibitions, its employees and affiliates from any liability.

**Once the Proxy Statement and/or Exhibit Space Contract is signed all cancellation policies apply.**

## PAYMENT TERMS:

Fifty percent (50%) of the total fee for the exhibit space must be received within two weeks after receipt of statement. The balance is due on June 13, 2025. Applications received on or after June 14, 2025 must be accompanied by 100% of the fee.

## CANCELLATION AND REDUCTION OF SPACE POLICY:

Once this contract form is signed by the Exhibitor and exhibit space is allocated to the Exhibitor by Show Management, the Exhibitor is contracted to the exhibit space. Cancellation requests must be in writing, and agreement by show management to any request for cancellation or reduction of space shall be subject to the following fees: Cancellations and booth downsizes received by June 13, 2025 are subject to a fee equal to 50% of the booth price. Cancellations and booth downsizes received on or after June 14, 2025 are subject to a fee equal to 100% of the booth space. Cancellations will result in forfeit of all exhibitor badges.

## ACCEPTANCE OF TERMS AND CONDITIONS:

Produced by **SupplySide West 2025** ("Show Management" or "we"), a division of Informa Exhibitions, LLC ("Informa"). By completing and returning this contract, the company identified on this contract form ("you" or "exhibitor") is applying for exhibit space at the **SupplySide West 2025** (the "Show"). Upon written confirmation of acceptance by Show Management and assignment of exhibit space, this contract shall become effective and form a binding agreement between you and Show Management governing the non-assignable license granted to you to use exhibit space for the Show. The agreement formed incorporates: The terms and conditions set forth on this contract form and the Additional Terms and Conditions (accessible at <https://informahealthandnutrition.com/terms-conditions/>) (collectively, "Terms and Conditions"); The terms, conditions, rules, regulations and guidelines set forth in the Exhibitor Services Kit (accessible at <https://west.supplysideshow.com/en/exhibit/exhibitor-resources.html>) and Compliance (accessible at <https://west.supplysideshow.com/en/exhibit/compliance.html>); All additional standards, policies and directives ("Policies") published or provided by Show Management relating to the Show (collectively, the "Agreement"). The foregoing shall control in the following order of priority to the extent there is any direct conflict between or among them: first, the Terms and Conditions, second, the Exhibitor Services Kit, and third, the Policies. Show Management reserves the right to reject any application for exhibit space for any reason.

The completed form must be returned to: [Aliece.Stewart@informa.com](mailto:Aliece.Stewart@informa.com)



October 28 - 29, 2025  
Mandalay Bay, Las Vegas, NV

Exhibit Space Contract

**Company/Billing Information:**

Company Name:	
Exhibiting-As Name:	
Billing Street Address:	
Billing City/State/Zip:	
Website:	

**Primary Contact Information:**

One per contract. Individual to receive all communications related to the exhibit space.

Contact Name (First and Last):	
Title:	
Email Address:	
Phone Number:	

+ **Please proofread** the information in the area above carefully. The Primary Contact will have the ability to change the above information online should you choose to publish alternate company information online. A password will be supplied with your exhibit space confirmation via e-mail to the e-mail address listed above. Contact name and title will not appear in the online listing.

**SupplySide West 2025 Booth Pricing**

Check the box next to which booth type(s) you're interested in

Booth Type	Price
Linear Booth (in 10x10 increments)	\$96/sq ft
Island Booth (in 10x10 increments)	\$99.50/sq ft
Corner Booth (in 10x10 increments)	\$1,500
International Exhibitor Insurance Fee ( <u>Required</u> for all non-US and non-Canadian exhibitors)	\$185.00

**Booth Options**

List 5 or more, in order of preference (**Exhibit Space is subject to availability**)

Booth Option	Booth Size/Type	Booth Option	Booth Size/Type
#1:		#5:	
#2:		#6:	
#3:		#7:	
#4:		#8:	

**CONTRACT ACCEPTANCE:**

By signing below, exhibitor agrees to abide by the terms and conditions of this Agreement, and hereby represents and warrants that the undersigned is duly authorized to execute this Agreement on behalf of exhibitor.

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Signature: \_\_\_\_\_